

06/18/01
1c796 U.S. PTO

06/20/01

1/Reissue

Please type a plus sign (+) inside this box ☒

PTO/SB/50 (02-01)
Approved for use through 01/31/2004 OMB 0651-0033
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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REISSUE PATENT APPLICATION TRANSMITTAL

Address to:

Assistant Commissioner for Patents
Box Reissue
Washington, DC 20231

Attorney Docket No.	01-9676
First Named Inventor	Johnson Kuo
Original Patent Number	6,152,866
Original Patent Issue Date (Month/Day/Year)	November 28, 2000
Express Mail Label No.	EL132026350US

APPLICATION FOR REISSUE OF:

(Check applicable box)

☒ Utility Patent ☐ Design Patent ☐ Plant Patent

APPLICATION ELEMENTS (37 CFR 1.173)

- ☒ Fee Transmittal Form (PTO/SB/56)
(Submit an original, and a duplicate for fee processing)
- ☒ Applicant claims small entity status. See 37 CFR 1.27.
- ☒ Specification and Claims in double column copy of patent format (amended, if appropriate)
- ☒ Drawing(s) (proposed amendments, if appropriate)
- ☒ Reissue Oath/Declaration (original or copy)
(37 C.F.R. § 1.175) (PTO/SB/51 or 52)
- ☒ Power of Attorney
- Original U.S. Patent currently assigned? ☐ Yes ☒ No
(If Yes, check applicable box(es))
 - ☐ Written Consent of all Assignees (PTO/SB/53)
 - ☐ 37 C.F.R. § 3.73(b) Statement (PTO/SB/96)
- ☐ CD-ROM or CD-R in duplicate, Computer Program (Appendix) or large table
- Nucleotide and/or Amino Acid Sequence Submission (if applicable, all of the following are necessary)
 - a. ☐ Computer Readable Form (CFR)
 - b. Specification Sequence Listing on:
 - ☐ CD-ROM (2 copies) or CD-R (2 copies); or
 - ☐ paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

- ☒ Statement of status and support for all changes to the claims. See 37 CFR 1.173 (c).
- ☒ Original U.S. Patent for surrender
-- Offer to Surrender --
 - ☐ Ribboned Original Patent Grant
 - ☐ Statement of Loss (PTO/SB/55)
- ☐ Foreign Priority Claim (35 U.S.C. 119) (if applicable)
- ☒ Information Disclosure Statement (IDS)/PTO-1449 ☒ Copies of IDS Citations
- ☐ English Translation of Reissue Oath/Declaration (if applicable)
- ☐ Preliminary Amendment
- ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
- Other: Request for Transfer of Drawings; Statement Regarding Litigation Status.

18. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label 25189 or ☐ Correspondence address below
(Insert Customer No. or Attach bar code label here)

Name			
Address			Zip Code
City	State	Fax	
Country	Telephone		

NAME (Print/Type)	Daniel M. Cislo, Esq.	Registration No. (Attorney/Agent)	32,973
Signature		Date	6/15/01

Burden Hour Statement This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Box Reissue, Washington, DC 20231.

06/18/01
 106796 U.S. PTO

PTO/SB/56 (08-00)

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REISSUE APPLICATION FEE TRANSMITTAL FORM

Docket Number (Optional)
 01-9676

Claims as Filed - Part 1

Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity	
				Rate	Fee	Rate	Fee
(A) 2	Total Claims (37 CFR 1.16(j))	(B) 29	**** 9 =	x \$ 9 =	81	or	x \$ =
(C) 1	Independent claims (37 CFR 1.16(i))	(D) 7	* 6 =	x \$ 40 =	240		x \$ =
Basic Fee (37 CFR 1.16(h))				\$355			\$
Total Filing Fee				\$676		OR	\$

Claims as Amended - Part 2

	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	***	MINUS	**	*	=	x \$ =		x \$ =
Independent Claims (37 CFR 1.16(i))	***	MINUS	*****	=	=	x \$ =		x \$ =
Total Additional Fee					\$	OR	\$	

* If the entry in (D) is less than the entry in (C), Write "0" in column 3.

** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.

*** After any cancellation of claims.

**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).

***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).

☒ Applicant claims small entity status. See 37 CFR 1.27.

☐ Please charge Deposit Account No. _____ in the amount of _____.
 A duplicate copy of this sheet is enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. 03-2030.
 A duplicate copy of this sheet is enclosed.

☒ A check in the amount of \$676.00 to cover the filing / additional fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

June 18, 2001
 Date

Signature of Applicant, Attorney or Agent of Record

Daniel M. Cislo, Esq.
 Typed or printed name

REISSUE APPLICATION FEE DETERMINATION RECORD

CLAIMS AS FILED - PART I

(1)		(2)	(3)	SMALL ENTITY			OTHER THAN A SMALL ENTITY	
CLAIMS IN PATENT	FOR	NO FILED IN REISSUE APPLICATION	NO EXTRA	RATE	FEE	OR	RATE	ADDIT. FEE
(A) 2	TOTAL CLAIMS (37 C F R Section 1 16(j))	(B) 29	**** 9	x \$9 =	\$81			
(C) 1	INDEP CLAIMS (37 C F R Section 1 16(i))	(D) 7	(D-C)* 6	x \$40 =	\$240			
	BASIC FEE (37 C F R Section 1 16(h))		\$355		\$355			
			TOTAL FILING FEE		\$676	OR		

CLAIMS AS AMENDED - PART II

	(1)		(2)	(3)	SMALL ENTITY			OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT ***		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT FEE	OR	RATE	ADDIT FEE
TOTAL CLAIMS (37 C.F.R. Section 1.16(j))		MINUS	**	=	x\$11=	\$		x\$22=	\$
INDEP CLAIMS (37 C.F.R. Section 1.16(i))		MINUS	*****	=	x\$41=	\$		x\$82=	\$
TOTAL ADDIT FEE						\$	OR		\$

* If the entry in column 2 is less than the entry in column 1, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** After any cancellations of claims.

**** If "A" is greater than 20, use (B-A); if "A" is 20 or less, use (B-20).

***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).

A check in the amount of \$676.00 is enclosed

The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. sections 1.16 or 1.17 that may be required, or credit any overpayment to Account No. 03-2030 Deposit Account Number***.

A duplicate copy of this sheet is enclosed.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: JOHNSON KUO

Patent No.: 6,152,866

Group Art Unit: 3764

Filed: January 19, 2000

Examiner: S. Crow

Title: Folding Collapsible Exercising Apparatus

Assistant Commissioner for Patents

Washington, D.C. 20231

BOX PATENT REISSUE APPLICATIONS

STATEMENT REGARDING LITIGATION STATUS

Sir:

This reissue application may potentially be involved in future litigation.

Respectfully submitted,

Date: 6-15-01

Daniel M. Cislo
Attorney for Applicant
Reg. No. 32,973
Cislo & Thomas LLP
233 Wilshire Boulevard, Suite 900
Santa Monica, California 90401-1211
Tel: (310) 451-0647
Fax: (310) 394-4477



I hereby certify that this correspondence is being deposited with the United States Postal Service as EXPRESS MAIL in an envelope addressed to:

BOX PATENT REISSUE APPLICATION

Commissioner of Patents and Trademarks

Washington, D.C. 20231

on June 18, 2001.

Date:

June 18, 2001

Linda Black

CISLO & THOMAS LLP

233 Wilshire Boulevard, Suite 900

Santa Monica, California 90401

Tel: (310) 451-0647

Fax: (310) 394-4477

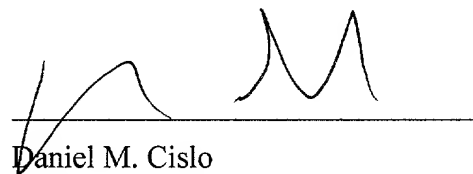


**REQUEST FOR TRANSFER OF DRAWINGS FROM ORIGINAL PATENT
TO REISSUE APPLICATION**

Please transfer the drawings from original patent **6,152,866** filed on November 28, 2000, for the invention entitled ***Folding Collapsible Exercising Apparatus*** to the reissue application, the specification of which is attached hereto.

Date:

6-15-01



Daniel M. Cislo

Registration No. 32,973

CISLO & THOMAS LLP

233 Wilshire Boulevard, Suite 900

Santa Monica, CA 90401

Tel: (310) 451-0647

Fax: (310) 394-4477

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